PTO/SBIOS (08-03)
Approved for use through 7/31/2005, OMB 0551-0032
U.S. Peters and Trademark Office; U.S. DEPARTMENT OF COMMERCE
to collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-475									70/7/7/064		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL E	ENTITY	OR	OTHER THAN	
FOR A			ER FILED	MARKE	MAMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR L18(4))							1	OR		8	
	AL CLAMS FR LIG(d)		minus 20 ·		•		x s=		OR	x s•	
	PENDENT CLAS FR 1.16(H)	48	minus 3 =				x 1•		OR	x 1•	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(4))							+==		OR	+1	
* If the difference in column 1 is less than zero, enter "O" in column 2.							TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											
11 9 000									OR		RTHAN
\mathcal{U}	~~~ <u>~~</u>	(Column 1)		(Column 2) HIGHEST	(Column 3)	1 1	SMALL E		1		ENTITY
ENT.		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	AOOH TIONAL FEE		RATE	ADDI- TIONAL FEE
5	Total profit sales	28	Minus	<i>"20</i>	·2		X 6 4		OR	×50.	100.00
END	independent g) of it subpil	2	Minus	3	-		25=		OR	x 5*	
AM	FIRST PRESENT	ATION OF MULTIPL	e depende	ENT CLAIM (IF C	R LI SIGI		+6=		OR	+5=	
2 / 20/2							TOTAL ADDL FEE		OR	TOTAL ADD'L FEE	100.00
_	() 0	CLAME		(Column 2)	(Column 3)	1			}		
N	·	REMAINING AFTER AMENDMENT	·	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADD+ TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total pace integ	28	Minus	·~28	·Ø]	x s=		OR	×50.	B
	(J3 CPR L1809)	à	Minus	···(3	·Ø]	X 8 e		OR	*300	0
PURST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (LT CFR 1.18/03)						•	+3		OR	•;	,
406							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	LD_
0	7/ 10	(Column 1)		(Column 2)	(Column 3)	1		,	1		
Ž		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE .	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ΜĚ	Total car one suece	28	Minus	36	*	1	x1		OR	X 5	
MENDMENT	Independent (37 CFR 1,1494)	12	Minus		9]	x 5		OR	19/-	
₹	FIRST PRESENT	TATION OF MULTIPL	1 06P0406	ENT CLAM DT C	FR 1.16(4)		••		OR,	/• •	
							TOTAL ADD'L FEE	l	1 🚜	TOTAL ADO'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Peid For" IN THIS SPACE is less than 2, enter "20". "If the "Highest Number Previously Peid For" IN THIS SPACE is less than 3, enter "7".											

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or independent) is the highest number tound in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to life (and by the USPTO to process) an application. Certificentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 crimates to complete including gathering, preparing, and submitting the completed application form to the USPTO the will vary depending upon the indivious case, Any comments on the amount of time you require to complete this form arother suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Palent and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, OO NOT SENO FEES OR COMPLETED FORMS TO THIS ADDRESS, SENO TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need essistance in completing the form, call 1-800-PTO-9199 and salect option 2.